PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

09/982086

·		CLAIMS AS	PART ((Column 2) SMALL ENTITY TYPE TYPE					OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			:				1	RATE	FEE	1	RATE	FEE
FOR			NUMBER F	ILED	NUMBI	ER EXTRA		BASIC FEE	\$375	OR	BASIC FEE	\$750
то	TAL CHARGEA	BLE CLAIMS	minus 20= *		*			X\$ 9=		ĢR	. X\$18=	
IND	EPENDENT CL	AIMS	minus 3 = *					X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							<u>_</u>	SMALL E	ENTITY	OR	OTHER SMALL	
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	, ADDI- TIONAL FEE
AMENDMENT	Total	. 64	Minus	* 6	4	= /		· X\$ 9=		OR	X\$18=	
AME	Independent	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Minus	*** &	CLAIM	= !		.X42≐		OR	X84=	
لنا	FIRST PHESE	NTATION OF MU	JUIPLE DEP	ENDENT	CLAIM		۱ د	+140=		OR	+280=	
	7					,	L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	ic	(Column 1)		(Colur		(Column 3)		<u> </u>				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 64	Minus	** 6	4	=		X\$ 9=	.,	OR	X\$18=/	
ME	Independent	. 5	Minus	·** <u>`</u>	-	= ·] [X42=		OR	X84=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┙╽	+140=	/	OR	+280=	
							L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT C	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										TOTAL ADDIT. F.E.E		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number 899 & 20 & 6

CLAIMS AS FILED - PART I (Column 1)						SMALL ENTITY Solumn 2) TYPE				OR	OTHER SMALL I	
TOTAL CLAIMS			64	, , , , , , , , , , , , , , , , , , , ,			ſ	RATE	FEE	ſ	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ţ	BASIC FEE	370.00	OR	BASIC FEE	740.00
T01	TAL CHARGEAB	LE CLAIMS	64 minus 20=		* 44			X\$ 9=		OR	X\$18=	792
INDI	EPENDENT CLA	IMS	min ج	minus 3 = * 7			Ì	X42=		OR	X84=	168
MUI	LTIPLE DEPEND			Ì	+140=		OR	+280=				
* If the difference in column 1 is less than zero, enter "0" in						olumn 2	ļ	TOTAL		OR	TOTAL	1700
CLAIMS AS AMENDED - PART II							OTHER THA					
(Column 1) (Column 2) (Column						(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER YIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	. 64	Minus	**	64	=		X\$ 9=		OR	X\$18=	
ME	1	. 5	Minus	***	5	=		X42=		OR	X84=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=.		OR	+280=	
}								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE		•	ADDIT: I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIC NU PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
MEN	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Co	lumn 2)_	(Column 3)		ADDIT. FEL			7,0011.1 C	
NTC		CLAIMS REMAINING AFTER AMENDMENT		HI NI PRE	GHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MG	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESI	ENTATION OF	MULTIPLE DE	PENDE	ENT CLAIN	1	L	+140=		OR		
	* If the entry in colu	umn 1 is less thar	n the entry in co	lumn 2, v	write "0" in c	olumn 3.		TOTAL		OR	TOTA	L
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.									E L			